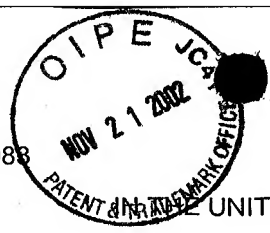


2834



FORM PTO-1088

81868.0038

UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Hiromitsu TAKEI
Serial No: 10/036,090
Filed: November 6, 2001
For: PERMANENT MAGNET EMBEDDED MOTOR AND
METHOD FOR MANUFACTURING MOTOR AND
ROTOR

Art Unit: 2834
Examiner: Nguyen, Hanh N.

I hereby certify that this correspondence is
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mail in an envelope addressed to:
Commissioner for Patents
Washington D.C. 20231, on
November 15, 2002

Date of Deposit
Joyce Hegeman
Name
Signature
Date

Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

Transmitted herewith is a Response to Restriction Requirement in the above-identified application.

- ☐ Small entity status has been claimed. See 37 CFR § 1.27.
- ☐ A certified copy of ___ Patent Application No. ___ filed ___ from which priority is claimed under 35 U.S.C. § 119 is enclosed.
- ☐ A Notice Of Change Of Attorney's Address and Associate Power Of Attorney is enclosed.
- ☐ No additional fee is required.

The fee has been calculated as shown below:

The fee has been calculated as shown below.

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	9	-	20 **	0	LG=\$18 SM=\$9	[\$FEE]	\$ 0
INDEPENDENT CLAIMS FEE	1	-	4 ***	0	LG=\$84 SM=\$42	[\$FEE]	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$280 SMALL ENTITY FEE = \$140		\$
TOTAL							\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$ ___ 0 ___ to cover the additional claims fee is enclosed. **A copy of this sheet is enclosed.**
- ☐ A check in the amount of \$ ___ 0 ___ to cover the extension fee is enclosed. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
 - ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
 - ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

By: Michael L. Crapenhoft
Michael L. Crapenhoft
Registration No. 37,115
Attorney for Applicant(s)

Date: November 15, 2002

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